

ERENCE & ASSOCIATES
Amendment Transmittal

Atty. Docket No. YOR920010151US1
(590.057)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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DEC 27 2004

In re Application of : Das et al.
Serial No. : 09/829,701 Examiner : C. Kyle
Filed : April 10, 2001 Group Art Unit : 3624
For : AUTOMATED BIDDING AGENT FOR ELECTRONIC AUCTIONS

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.

OR

2. In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

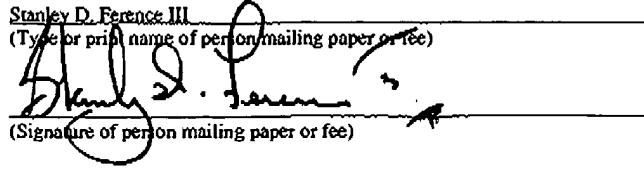
3. Small Entity status of this application has been established by a verified statement previously submitted.

4. A verified statement to establish Small Entity status is enclosed.

CERTIFICATE OF TRANSMISSION UNDER 37 CFR § 1.8(a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (703) 872-9306 on December 27, 2004 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III
(Type or print name of person mailing paper or fee)


(Signature of person mailing paper or fee)

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5. Also enclosed: _____

6. No additional filing fee is required.

7. The filing fee has been calculated as shown below:

	Claims Remaining After Amendment (Col. 1)	Highest No. Prev. paid for (Col. 2)	Present Extra (Col. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
				RATE	FEE	RATE	FEE
Total Claims	45	** 49	= * 0	x \$25	=	O x \$50	= 0
Ind. Claims	8	*** 8	= * 0	x \$100	=	O x \$200	= 0
<input type="checkbox"/> Multiple Dependent Claim Presented				+ \$180	=	O + \$360	=
				<u>TOTAL</u>	= \$	O <u>TOTAL</u>	= \$0
						R	

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space.

*** If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

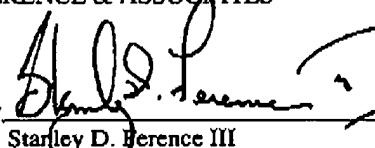
8. Applicant encloses herewith a check for \$_____ to cover the filing fee.

9. The Commissioner is hereby authorized to charge the \$_____ filing fee to Deposit Account No. 50-0510.

10. The Commissioner is hereby authorized to charge payment of any additional filing fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510.

Respectfully submitted,

ERENCE & ASSOCIATES

By 
Stanley D. Berence III
Reg. No. 33,879

Dated: December 27, 2004

Mailing Address:

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12-27-'04 23:38 FROM-

412-741-9292

T-009 P011/029 F-030

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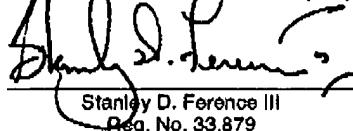
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December 27, 2004

AMENDMENT

I hereby certify that this correspondence and any documents referred to as
enclosed therewith are being transmitted by facsimile to the Commissioner
for Patents on facsimile number (703) 872-9306 on December 27, 2004.


Stanley D. Ference III
Reg. No. 33,879

December 27, 2004
Date of Signature

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Responsive to the Office Action dated August 26, 2004, please amend the above-
identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on
page 2 of this paper.

Remarks begin on page 12 of this paper.